House of Representatives



General Assembly

File No. 216

January Session, 2017

House Bill No. 5963

House of Representatives, March 27, 2017

The Committee on Insurance and Real Estate reported through REP. SCANLON of the 98th Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

AN ACT CONCERNING TREATMENT OR CARE PROVIDED BY RELIGIOUS NONMEDICAL PROVIDERS UNDER HEALTH INSURANCE POLICIES OR HEALTH BENEFIT PLANS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. (NEW) (Effective October 1, 2017) (a) As used in this
- 2 section, "religious nonmedical provider" means a provider who
- 3 provides no medical care and who provides only religious nonmedical
- 4 treatment or care.
- 5 (b) Nothing in chapter 700c or 700d of the general statutes shall be construed to:
- 7 (1) Limit the right of a health insurance company, health care center,
- 8 hospital service corporation, medical service corporation or other
- 9 entity that delivers, issues for delivery, renews, amends or continues a
- 10 health insurance policy or health benefit plan in this state to include
- 11 religious nonmedical providers as in-network providers;
- 12 (2) Require any such company, center, corporation or other entity to

exclude religious nonmedical providers from its provider network on the basis that the religious nonmedical providers do not provide medical or other data required from health care providers, if such data are inconsistent with the religious nonmedical treatment or care provided by the religious nonmedical provider;

- (3) Require any such company, center, corporation or other entity to use medically based eligibility standards or criteria to decide the provider status of a religious nonmedical provider or to decide an insured's or enrollee's access to a religious nonmedical provider;
- (4) Require, notwithstanding sections 38a-591a to 38a-591n, inclusive, of the general statutes, any such company, center, corporation or other entity to use medical professionals or criteria for a utilization review of a benefit request for a religious nonmedical provider or for a grievance of an adverse determination or a final adverse determination involving a benefit request for a religious nonmedical provider; or
 - (5) Compel an insured or enrollee to undergo a medical examination or test as a condition of receiving coverage for treatment or care provided by a religious nonmedical provider.

This act shall take effect as follows and shall amend the following sections:

Section 1 October 1, 2017 New section

INS Joint Favorable

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The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

The bill is not anticipated to result in a fiscal impact to the state employee and retiree health plan or municipal health plans as the bill does not require health plans to include religious non-medical providers in their network. In addition, in practice health plan carriers, including those in the state plan, only include licensed providers in their networks. The state does not currently license religious non-medical providers. Lastly, the state health plan only provides coverage for care deemed "medically necessary"; the provisions of the bill restrict the services of the religious provider to non-medical in nature and therefore would not be covered by the plan.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis HB 5963

AN ACT CONCERNING TREATMENT OR CARE PROVIDED BY RELIGIOUS NONMEDICAL PROVIDERS UNDER HEALTH INSURANCE POLICIES OR HEALTH BENEFIT PLANS.

SUMMARY

This bill allows health carriers (e.g., insurers and HMOs) to include religious nonmedical providers in their provider networks. Under the bill, a "religious nonmedical provider" provides only religious nonmedical treatment or care and does not provide medical care.

The bill specifies that state health insurance laws do not require health carriers to:

- exclude religious nonmedical providers from their provider networks because they do not provide medical or other data required from health care providers,
- 2. use medically based eligibility criteria to determine a provider's status as a religious nonmedical provider or an enrollee's access to such a provider,
- 3. use medical professionals or criteria for utilization reviews or grievance determinations involving a benefit request for a religious nonmedical provider, or
- 4. compel an enrollee to undergo a medical examination or test as a condition of receiving coverage for services provided by a religious nonmedical provider.

The bill applies to health insurers, HMOs, hospital and medical service corporations, and other entities that deliver, renew, amend, or continue health insurance policies or benefit plans in Connecticut.

EFFECTIVE DATE: October 1, 2017

COMMITTEE ACTION

Insurance and Real Estate Committee

Joint Favorable

Yea 20 Nay 0 (03/07/2017)